

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

[Enter your name, address and phone number]

JONATHAN C. SCOTT P.C.
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LAW OFFICES OF GABRIEL DEL VIRGINIA
30 Wall Street, 12th Floor
New York, New York 10005
Tel: 212-371-5478
gabriel.delvirginia@verizon.net
Gabriel Del Virginia, Esq.
Counsel for Vista Food Exchange, Inc.

In Re:

[Enter the debtor's name(s)]

SIMON SZEKIT LAW
DEBTOR

Case No.: 2-23-BK-19542

[Enter the case number]

Chapter: Chapter 11

[Enter the chapter of the case]

Hearing Date: 3/26/2024

[Enter the hearing date]

Judge: Honorable Stacey L. Meisel

[Enter the Judge's last name]

CERTIFICATION OF SERVICE

1. I, Jonathan C. Scott :

☒ represent Vista Food Exchange, Inc. in this matter.

☐ am the secretary/paralegal for _____, who represents
_____ in this matter.

☐ am the _____ in this case and am representing myself.

2. On *[Enter the date you served the documents]* 3/4/2024, I sent a copy of the
following pleadings and/or documents to the parties listed in the chart below.

[Place a check next to each document you served]

☐ Notice of Motion *[Enter title of motion]* _____

☒ Certification in Support of Motion *[Enter title of motion]* Motion for 2004 Examination


☐ Statement as to Why No Brief is Necessary

☐ Proposed Order Granting Motion *[Enter title of motion]* _____

☐ Other *[Enter title of document]* _____

3. I certify under penalty of perjury that the above documents were sent using the mode of service indicated.

Date: 3/4/2024
[Enter the date you signed this document]


Signature *[Of the person who served the documents]*

| Name and Address of Party Served | Relationship of Party to the Case | Mode of Service |
|--|--|---|
| <p><i>[Enter the name and address of the party you served]</i></p> <p>Jenee K. Ciccarelli Ciccarelli Law, PC 239 New Road Building, A, Suite 301 Parsippany, NJ 07054-5612</p> | <p><i>[Enter the party's relationship to the case]</i></p> <p>Counsel</p> | <p><input type="checkbox"/> Hand-delivered</p> <p><input type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/Return receipt requested</p> <p><input checked="" type="checkbox"/> Other <u>ECF</u></p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p> |
| <p><i>[Enter the name and address of the party you served]</i></p> <p>US Trustee US Department of Justice Office of the US Trustee One Newark Center, Suite 2100 Newark, NJ 07102-5235</p> | <p><i>[Enter the party's relationship to the case]</i></p> <p>US Trustee</p> | <p><input type="checkbox"/> Hand-delivered</p> <p><input type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/Return receipt requested</p> <p><input checked="" type="checkbox"/> Other <u>ECF</u></p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p> |
| <p><i>[Enter the name and address of the party you served]</i></p> <p>Manager/President 145 Irvington Realty, LLC 145 40th Street Irvington, NJ 07111</p> | <p><i>[Enter the party's relationship to the case]</i></p> <p>Subject of Rule 2004 Examination</p> | <p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p> |
| <p><i>[Enter the name and address of the party you served]</i></p> <p>Manager/President SDJ Trading, Inc. 145 40th Street Irvington, NJ 07111</p> | <p><i>[Enter the party's relationship to the case]</i></p> <p>Subject of Rule 2004 Examination</p> | <p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p> |
| <p><i>[Enter the name and address of the party you served]</i></p> <p>Manager/President Rosenberg Rick Baker Berman, P.A. 265 Davidson Avenue, Suite 210 Somerset, NJ 08873</p> | <p><i>[Enter the party's relationship to the case]</i></p> <p>Subject of Rule 2004 Examination</p> | <p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p> |

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| <p><i>[Enter the name and address of the party you served]</i></p> <p>Lawson Foods, LLC 145 40th Street Irvington, NJ 07111</p> | <p><i>[Enter the party's relationship to the case]</i></p> <p>Subject of Rule 2004 Examination</p> | <p><input type="checkbox"/> Hand-delivered</p> <p><input type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input checked="" type="checkbox"/> Other <u>email to their SDNY attorney</u></p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p> |
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